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PTO/SB/21 (08-00)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/893,321	
	Filing Date	06/27/01	
	First Named Inventor	Walke	
	Group Art Unit	1647	
	Examiner Name	R.S. Landsman	
Total Number of Pages in This Submission	29	Attorney Docket Number	LEX-0195-USA

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): return postcard
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<input checked="" type="checkbox"/> Extension of Time Request		
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<input type="checkbox"/> Information Disclosure Statement		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Customer # 24231

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Lance K. Ishimoto Reg. No. 41,866 Lexicon Genetics Incorporated
Signature	<i>Lance K. Ishimoto</i>
Date	December 16, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, MS AF, P.O. Box 1450, Alexandria, VA 22313 on this date: December 16, 2003			
Typed or printed name	Nancy Stacey		
Signature	<i>Nancy Stacey</i>	Date	December 16, 2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Walke *et al.* Group Art Unit: 1647
Application No.: 09/893,321 Examiner: R. S. Landsman
Filed: 06/27/01
Title: Polynucleotides Encoding Human GABA Receptors (As Amended) Atty. Docket No. LEX-0195-USA

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES**

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Commissioner for Patents
Alexandria, VA 22313

Sir:


Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner in the Final Office Action mailed on August 18, 2003 (Paper No. 16) finally rejecting claims 1-6.

The fee as required under 37 C.F.R. § 1.17(b) for filing this Notice of Appeal is \$165.00, and the Commissioner is hereby authorized to deduct this fee from Applicants' Representatives' Deposit Account No. 50-0892. Applicants believe no fees in addition to the fees for filing the Notice of Appeal are due in connection with this communication. However, should any additional fees under 37 C.F.R. §§ 1.16 to 1.21 be required for any reason related to this communication, the Commissioner is authorized to charge any underpayment or credit any overpayment to Lexicon Genetics Incorporated Deposit Account No. 50-0892.

Respectfully submitted,

12/23/2003 SZEWDIE1 00000115 500892 09893321
01 FC:2401 165.00 DA

December 16, 2003
Date


Peter G. Seferian
Agent For Applicants

Reg. No. 40,162

LEXICON GENETICS INCORPORATED
(281) 863-3110
Custom r # 24231

FEE TRANSMITTAL for FY 2003		Compleat if Known	
Patent fees are subject to annual revision.		Application Number	09/893,321
DEC 22 2003		Filing Date	06/27/01
Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Walke
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	R. S. Landsman
165.00		Group Art Unit	1647
		Attorney Docket No.	LEX-0195-USA

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account		Large Entity Small Entity	
Deposit Account Number: 50-0892		Fee Code Fee (\$)	
Deposit Account Name: Lexicon Genetics Incorporated		Fee Description Fee Paid	
The Commissioner is authorized to: (check all that apply)		1051 130 2051 65 Surcharge - late filing fee or oath	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet	
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application		1053 130 1053 130 Non-English specification	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1812 2,520 1812 2,520 For filing a request for <i>ex parte</i> reexamination	
FEE CALCULATION		1804 920* 1804 920* Requesting publication of SIR prior to Examiner action	
1. BASIC FILING FEE		1805 1,840* 1805 1,840** Requesting publication of SIR after Examiner action	
Large Entity Small Entity		1251 110 2251 55 Extension for reply within first month	
Fee Code Fee (\$)		1252 420 2252 210 Extension for reply within second month	
1001 770 2001 385 Utility filing fee		1253 950 2253 475 Extension for reply within third month	
1002 340 2002 170 Design filing fee		1254 1,480 2254 740 Extension for reply within fourth month	
1003 530 2003 265 Plant filing fee		1255 2,010 2255 1,005 Extension for reply within fifth month	
1004 770 2004 385 Reissue filing fee		1401 330 2401 165 Notice of Appeal	
1005 160 2005 80 Provisional filing fee		1402 330 2402 165 Filing a brief in support of an appeal	
SUBTOTAL (1) (\$)		1403 290 2403 145 Request for oral hearing	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
Total Claims: 20** =		1452 110 2452 55 Petition to revive - unavoidable	
Independent Claims: 3** =		1453 1,330 2453 665 Petition to revive - unintentional	
Multiple Dependent		1501 1,330 2501 665 Utility issue fee (or reissue)	
Large Entity Small Entity		1502 480 2502 240 Design issue fee	
Fee Code Fee (\$)		1503 640 2503 320 Plant issue fee	
1202 18 2202 9 Claims in excess of 20		1460 130 1460 130 Petitions to the Commissioner	
1201 86 2201 43 Independent claims in excess of 3		1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	
1203 290 2203 145 Multiple dependent claim, if not paid		1806 180 1806 180 Submission of Information Disclosure Stmt	
1204 86 2204 43 **Reissue independent claims over original patent		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		1809 770 2809 385 Filing a submission after final rejection (37 CFR § 1.129(a))	
SUBTOTAL (2) (\$)		1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b))	
**or number previously paid, if greater; For Reissues, see above		1801 770 2801 385 Request for Continued Examination (RCE)	
		1802 900 1802 900 Request for expedited examination of a design application	
		Other fee (specify)	
		SUBTOTAL (3) (\$)	
		165.00	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Lance K. Ishimoto	Registration No. (Attorney/Agent)	41,866
Signature	<i>Lance K. Ishimoto</i>	Telephone	(281) 863-3333
	<i>Peter S. Schuman</i>	Date	December 16, 2003

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